

Work Order ID 125037

Friday, October 03, 2014 10:48:15 AM

Sup Mon Oct 6

125037

Page 1

Item ID: D4640-9

Accept

N900040100

Setup Start *NS1*

Revision ID:

Stop *NS2*

Item Name: RH Aft Wall Protector

Start Date: 10/3/2014 Start Qty: 2.00

2

Cust Item ID:

Required Date: 10/3/2014 Req'd Qty: 2.00

2

Customer:

Reference:

Approvals: Process Plan: MJS

Date: 14-10-03

Tooling:

Date:

Run Start *NR1*

QC:

Date:

SPC (Y/N):

Date:

Stop *NR2*

Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
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Draw Nbr

Revision Nbr

D4640

D

100

0.00

100

Waterjet

FLOW CNC Waterjet

Light Gray Lexa .093"

Memo

Confirm if parts are trimmed or untrimmed prior to cutting

Cut as per dwg

Prog Rev: D

Dwg Rev: D

Deburr as required

(2)

De 14/10/09

110

QC2- Inspect parts off machine FAI/FAIB

0.00

110

QC

Quality Control

Memo

0.00

(2)

De 14/10/09

DQA: _____ Date: _____

**WORK ORDER NON-CONFORMANCE / UPDATE**

QA Closed: _____ Date: _____

Work Order update only ☐

Work Order: _____ Part No. _____ NCR No. _____	DISPOSITION Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Suspected Unapproved <input type="checkbox"/>	AGAINST DEPARTMENT/PROCESS <table style="width: 100%;"> <tr> <td>Skid-tube <input type="checkbox"/></td> <td>Crosstube <input type="checkbox"/></td> <td>Water Jet <input type="checkbox"/></td> <td>Engineering <input type="checkbox"/></td> </tr> <tr> <td>Machining <input type="checkbox"/></td> <td>Small Fab <input type="checkbox"/></td> <td>Prod. Eng. Coord. <input type="checkbox"/></td> <td>Quality <input type="checkbox"/></td> </tr> <tr> <td>Thermoforming <input type="checkbox"/></td> <td>Finishing <input type="checkbox"/></td> <td>Rec/Store/Packaging <input type="checkbox"/></td> <td>Other <input type="checkbox"/></td> </tr> <tr> <td>Large Fab <input type="checkbox"/></td> <td>Composite <input type="checkbox"/></td> <td>Supplier <input type="checkbox"/></td> <td></td> </tr> </table>	Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>	Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>	Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>	Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>	
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Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>																

Root Cause	Date	Step	Qty	Description of work order update or non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector
Design									
Doc/Data									
Equip/Tooling									
Handling/Pre									
Material									
Operator									
Offset/Setup									
Process									
Supplier									
Training									
Transport									
Unapproved									

FAULT CATEGORY

Landing Gear <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric <input type="checkbox"/> Cracks <input type="checkbox"/> Crimp/Kink/Ripple/Wave <input type="checkbox"/> Cuffs <input type="checkbox"/> Crushing <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Marks/Chatter <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube	General <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damage/Defect <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drawing <input type="checkbox"/> Drill Holes <input type="checkbox"/> Finish <input type="checkbox"/> Fit/Function	<input type="checkbox"/> Folio/Program <input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete/Unqualified <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Misaligned/off center <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Off-set <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence
		<input type="checkbox"/> Outside Dimensions <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge
		<input type="checkbox"/> Pressure/Forced Set-up <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other

Work Order ID 125037

Friday, October 03, 2014 10:48:15 AM

125037

Page 2

Item ID: D4640-9

Accept

N900040100Setup Start ***NS1***

Revision ID:

Stop ***NS2***

Item Name: RH Aft Wall Protector

Start Date: 10/3/2014 Start Qty: 2.00

2

Cust Item ID:

Required Date: 10/3/2014 Req'd Qty: 2.00

2

Customer:

Reference:

Approvals:

Process Plan:

Date:

Tooling:

Date:

Run Start ***NR1***

QC:

Date:

SPC (Y/N):

Date:

Stop ***NR2***Sequence ID/
Work Center IDOperation
DescriptionSet Up/
Run Hours

Tool ID

Tool #

Plan
CodeAccept
QtyReject
QtyReject
NumberInsp.
Stamp

120

QC8- Inspect parts - second check

0.00

120

QC

Quality Control

Memo

USE TEMPLATE TO MARK HOLE LOCATIONS WITH A FINE POINT
MARKER ON TEXTURED SIDE

0.00

(2)

DAS

38

9-89

14-10-9

130

Identify as per dwg & Stock Location: *Stu27*

0.00

130

Packaging

Packaging

Memo

0.00

PP125029

2

DAS

86

9-89

OCT 09 2014

140

QC21- Final Inspection - Work Order Release

0.00

140

QC

Quality Control

Memo

0.00

*14/10/10**MF**14-10-9*

DQA: _____ Date: _____



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Picklist Print

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Page 1

Work Order ID: 125037

125037

Parent Item: D4640-9

D4640-9

Parent Item Name: RH Aft Wall Protector

Start Date: 10/3/2014

Required Date: 10/3/2014

Start Qty: 2.00

Required Qty: 2.00

Comments: IPP REV:A 12.05.08 NEW ISSUE DD VERF:EC
12.10.17 AS PER REV.B VERF:JLM

IPP REV:B

Component Item ID/ Item Name	Replacement Item ID	Mfg/ Purch	Bin Item	Primary Location	Last Location	Route Seq ID	Unit of Measure	Qty on Hand	Qty per Kit	Total Qty	Qty Issued	Date Issued	Status
MLEXS.093-F6006-07		Purchased			No	100	sf	2,570.313	5.3	12			

MI FXS 093-F6006-07

GE PLASTICS LEXAN SHEET (Grey)

**

02/14/10/09

Location

Loc Qty

Loc Code

MAT023

2570.31332

114459

229.26

123105

38

124501

543.5

m128668

181.35

m129014

102.33332

m129471

21.92

m129738

1453.95

7.222

DQA: _____ Date: _____



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